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**CONFIRMATION NO. 8229** 

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APPLICANTS									
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** CONTINUING DATA **********************************									
** FOREIGN APF	PLICAT	TIONS ************************************	***						v.
IF REQUIRED, F ** 03/13/2001	OREI	ON FILING LICENSE	GRANTE	ED ** SMALL E	NTITY	**			
Foreign Priority claimed		U yes Ind		STATE OR	SHE	ETS	тот	AL	INDEPENDENT
35 USC 119 (a-d) cond met Verified and Acknowledged	,	yes no Mot after	ials	COUNTRY		WING 0	CLAII 18		CLAIMS 3
ADDRESS 48329 FOLEY & LARDN 111 HUNTINGTO 26TH FLOOR BOSTON , MA 02199-7610									
TITLE Methods and pha	rmace	utical preparations for	normali	zing blood pres	ssure v	vith (-)-h	ıydroxyci	tric ac	sid
*	☐ All Fees								
F	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUN					1.16 Fees (Filing)			
FILING FEE	No for following: 1.17 Fees ( Processing E time )						essing Ext: of		
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420	□ 1.18 Fe	es (Issue)
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